

Minutes of the Regional Advisory Committee  
Pacific Southwest Regional Medical Library (PSRML)  
Tuesday, April 23, 2002  
UCLA Faculty Center, Hacienda Room

*Committee Members Present:* John Breinich, Gwendolyn Doebbert, Laura Gerwitz, Mary Lou Goldstein, Janie Grossman, Craig Haynes, Florence Jakus, Sara Jones, Virginia Lowell, Marlo Maldonado Young (Guest), Diana Paque, Lisa Smith, Russ Toth, Gail Yokote, Joan Zenan

*PSRML Staff Present:* Alison Bunting, Alan Carr, Kay Deeney, Elaine Graham, Julie Kwan, Andrea Lynch, Heidi Sandstrom

**Welcome and Introductions**

The meeting began at 9:00 a.m. with introductions. Regional Advisory Committee (RAC) members described notable developments in their environments—health sciences, public, and state libraries, as well as community and public health organizations.

Gwendolyn Doebbert—The California Department of Health Services is making progress with getting data onto the web, and is working with the Los Angeles County Department of Health Services and ESRI on developing vital statistics queries and thematic maps hyperlinked to tables.

Janie Grossman—The library for cancer patients and families at Santa Rosa Memorial Hospital has a new assistant position for 20 hours per week. The latest web project is working with a Catholic parish to create a Spanish information center on cancer.

Florence Jakus—The West Charleston Library completed an outreach project in consumer health information, funded by the National Library of Medicine. Florence is serving on the Library District's Technology Advisory Committee.

Diana Paque—The Library of California has 1,840 library members, encompassing all types of libraries. In an environment of change, the LOC is moving forward in spite of funding downturns in the state. Diana also serves as the grant monitor for LSTA funds.

Sara Jones—In Nevada the State Library has responsibility for the government archives and electronic records, as well as library services. A major challenge is preservation of the data related to the Fallon leukemia cluster.

Joan Zenan—Savitt Medical Library is looking forward to the dedication of the new library building. Joan is serving on the State Council on Libraries and Literacy. Her retirement is planned for June 30, 2003.

Mary Lou Goldstein—Scottsdale Healthcare opened a new cancer center in January 2002, and then a women's center; the shopping center concept has been very successful. Mary Lou is planning to reach out to Tribal communities in the Phoenix area.

Virginia Lowell—The Hawaii State Library has decided on a database package for all the libraries in the state.

John Breinich—The Hawaii Medical Library's Consumer Health Information Service would like to incorporate services to health insurance companies to generate income. HML is considering a merger with the University of Hawaii, which is building a new medical campus.

Laura Gerwitz—Laura continues to work toward automating hospital library operations.

Craig Haynes—Interviews with faculty at the UCSD Medical Center indicate they want more equipment in the library. Triplicate journal titles have been cancelled (the medical center is remote from the campus). Craig is President of the Medical Library Group of Southern California and Arizona; the group and PSRML have cooperated on educational support for librarians.

Alison Bunting—On July 1, 2002, Alison will assume the position of Interim University Librarian; she will continue as Director of PSRML until her planned retirement from UCLA in December 2002.

Lisa Smith—She noted that community-based organizations are interested in partnering with the University and in learning about resources.

Elaine Graham described the agenda for the day: the morning sessions focus on program planning and new ideas for consumer health outreach, health professional and population-based outreach, and library network development; and the afternoon discussions focus on outreach evaluation.

At the recent RML Directors Meeting at the National Library of Medicine (NLM), two areas were emphasized for outreach development: 1) encouraging affiliate membership in the National Network of Libraries of Medicine (NN/LM) to public libraries, as they are called on for health information by the public, and 2) improving information access for the public health workforce.

### **Consumer Health Information Outreach**

Public Libraries. How should we approach recruitment of public libraries as NN/LM members? What are the benefits and/or barriers to NN/LM membership for public libraries?

- Start with umbrella groups, such as consortia, library systems or networks.
- Start with state libraries; get information on MEDLINEplus out to public librarians through the state libraries.

- The upcoming Nevada Library Association offers an excellent opportunity for outreach and training for Nevada libraries; Sara Jones will provide a contact for program planning.
- In 2003 the Nevada Library Association will meet in conjunction with the Mountain Plains Library Association; a PSRML exhibit at that meeting would reach all types of libraries.
- Few barriers are seen, but the awareness of network membership and the value of joining must be communicated.
- Since there is no financial obligation, public libraries can join.
- Outside pressure works, such as partnerships with national organizations; this would be important in any campaign to get the MEDLINEplus logo on web sites.
- Prop 10 commissions in each county are responsible for getting information out to mothers with newborns.
- Interfaith service groups are increasingly interested in health issues.
- Get the message out to doctor's offices, medical associations, and HMO web sites to reach consumers.
- Use public service announcements (radio).
- In California, the service agreement between the Department of Health Services and the University of California, Berkeley, Public Health Library, needs to be publicized more broadly.
- Public libraries serve a distribution points, not just as access points. They are perceived as confidential sources. (An example of the public library as a distribution point is the availability of tax forms at branches.)
- Libraries are spending time on community information files. (A pilot project to augment MEDLINEplus with information on local resources is underway in North Carolina. The Arizona Turning Point Project also seeks to extend public health information resources.)
- Libraries need to work within e-government initiatives. Given the decreasing role of public libraries as government document depositories, libraries have to be more involved in discovering and pushing electronic resources for community information.
- Libraries are getting to know each other through multi-type cooperative projects, such as the 24/7 digital reference pilot project for referral of health questions from Los Angeles area public libraries to health sciences libraries. As the virtual reference environment expands, the value of cooperative database purchasing is even greater.
- In San Diego, the health sciences librarians invited the public librarians to attend their meeting; the discussions were worthwhile and opened the way for training.
- InfoPeople could be an avenue for offering training.
- In Hawaii, the State Library and Hawaii Medical Library have collaborated on collection development, staff training for health reference, and reference referral. Public libraries in Hawaii are part of the state government. Some public libraries still refer most health questions on, while others have been quick to incorporate web resources into their work to answer more questions locally. As intended, the Hawaii collaboration has supported the public libraries in maintaining good visibility as a source for health information in their communities.

- Concern was expressed for segments of the public that are not able to go to the public library, for example, prisoners. In addition, recruitment to prison librarian positions is difficult.
- Demonstrations at regional meetings may work better than mass distribution of publicity materials.
- Training is important to any awareness effort.
- Some public librarians may be reluctant to seek additional resources or provide health reference services, due to fear of expectations that may be generated and feelings of inadequacy in handling health questions.
- The Hawaii Partnership for MEDLINE Training project showed that it was important to get out to sites in person.

Community Organizations. What types of community organizations would be good contacts for health information outreach? What are effective approaches?

- Community clinics, such as the T.H.E. Clinic, Los Angeles, one of the largest clinics, would be good audiences. Many health professional students do internships and research there. Those in nonprofit organizations want to "own" their own research and need to know about the research tools.
- PSRML in previous years attempted outreach to East Los Angeles area clinics; an identified barrier was that administrators thought employees would waste time with web surfing, so computers and training in their use was not welcomed.
- CBO grant writers need more information about communities. At a recent meeting in Salt Lake City on outreach to Native American communities, it was clear from planning reports that communities want to have a hand in any research on their own community.
- Has anyone had success in working with faith-based organizations? The University of Maryland has a web site for parish nurses.
- An important principle is to go where people gather.
- Senior centers would be good outreach sites; it would be useful to contact academic centers such as the USC Andrus Gerontology Center for program ideas and partnerships.
- Community organization outreach could be documented in a "best practices" section of the web site. This could include NN/LM supported and independent activities of network members. Pilots in progress should get visibility, as well as completed projects.
- Program officers of area foundations, if made aware of NLM resources, might put health information resource links into calls for proposals.
- Outreach project participants might find a listserv or bulletin board useful; this would need to be a working, active group.

Florence Jakus, Craig Haynes, and John Breinich described completed outreach projects, funded through the NN/LM outreach award program, Electronic Access to Health Information for the Public. (Project descriptions and links to the project web sites can be found at: <http://nnlm.gov/psr/projects/ahip.html>.)

Heidi Sandstrom gave a brief overview of PSRML activities in training, consultation, and partnerships for consumer health information outreach. She demonstrated the consumer health web pages (<http://nnlm.gov/psr/chi.html>), including the consumer health library directory.

### **Outreach to Health Professionals and Populations**

Alan Carr provided a demonstration of the web site for Partners in Information Access for Public Health Professionals (<http://nnlm.gov/partners>). He highlighted the HP2010 Information Access Project, which provides automatic links to PubMed/MEDLINE citations related to Healthy People 2010 objectives. RAC members recommended that this site should be publicized more.

Two network members in the Pacific Southwest Region were awarded funding under the NN/LM Partners in Information Access for Public Health Professionals program. John Breinich reported on HiPHIVE (Hawaii Public Health Information Virtual Emporium, at <http://hml.org/hiphive/>), and Joan Zenan described PHIL (Public Health Information Links for Nevada, at <http://www.med.unr.edu/phil/>).

Public Health. How should we approach assessment of what regional needs are? What do we already know? How should PSRML target our outreach efforts?

- There is interest in information by communities; linking to PubMed articles by geographic area (e.g., zip codes) would be helpful. Could state and local documents be archived or indexed by NLM?
- NLM has partnered with other government agencies to make documents accessible, for example, the reports of the U.S. Surgeon General.
- Counting California, a collaborative project of the Library of California and the California Digital Library (University of California), enhances citizens' access to the growing range of social science and economic data produced by government agencies.
- Allied health workers (e.g., physical, radiation and respiratory therapists) are still underserved.
- In Nevada, the AHEC worked hard to achieve statewide connectivity. How do we effect readiness for change? Through the PHIL project, half of the public health professionals in the state were reached; however, parts of Clark and Washoe counties, rural health nurses, and industrial health workers have been hard to reach.
- At University of Hawaii, Public Health is now a department of the School of Medicine, rather than a separate school; the effects of this change are not yet evident.
- Hands-on training is critically important. Lisa Smith volunteered to help organize training at her STD clinic site, with the possibility of reaching approximately 100 health providers. There are 28 similar programs in Los Angeles County.
- Community-based providers also need to be tied in to document suppliers.
- Effective teaching approaches include problem- or scenario-based teaching and storytelling with a pathfinder.

- Public health professionals want answers to questions now, not literature. Public health is the world, not just medicine. (For example, finding information on health issues for commercial dishwashers was a challenge!) Some health sciences libraries have difficulty responding to the range of information needs in public health.
- Many public libraries now have full-text databases, which helps in delivering the answers sought.
- There is a need for better access to documents in public health (grey literature and local information). There are barriers to timely local data access; data must travel up to CDC and then back to the local area. There are many issues of identifiability and privacy, even at the aggregate level.
- Local health officers are potential targets for outreach. Activities might focus on local/state organizations and regional members of national public health associations. Participation in a continuing education day could open the way to more extended outreach.
- It is important to be aware of the diversity of any audience, and look for opportunities. In Hawaii, while health information training at the local level focused on consumers, the librarians presenting the training were also able to make connections with other groups.
- People lack understanding of web site content; it is important to do positive advertising.
- It was noted that the San Diego Medical Society web site doesn't have a link to PubMed.
- The MEDLINEplus link from Librarians Index to the Internet is not easy to find.
- It might be helpful to have a newsletter article on what a public health professional does. Dr. Jonathan Fielding was recommended as a possible author.

Kay Deeney gave a brief tour of the PSRML web site, including pages on training support, courses with CME approval, and upcoming exhibits. Kay also gave an overview of the 24/7 digital reference pilot project with the Metropolitan Cooperative Library System.

### **Library Network**

Julie Kwan reported on regional participation in PubMed's LinkOut for Libraries program. She described the membership renewal campaign and demonstrated the affiliate membership application on the PSRML web site. Julie also answered questions about the difference between PubMed/MEDLINE and MEDLINEplus.

### **Health Information Outreach Evaluation**

Cathy Burroughs, Assistant Director for the NN/LM Outreach Evaluation Resource Center, University of Washington, Seattle, presented an overview of principles of program evaluation and evaluation planning. (PowerPoint slides from this presentation are available on the PSRML web site at: <http://nnlm.gov/psr/racweb.html>.) Cathy is available for consultation to those planning or implementing NN/LM outreach.

## **PSRML Evaluation Planning**

The RAC discussed approaches to assessing the value and effectiveness of PSRML outreach programs and services.

- Do we need to have different objectives for different groups (CBO's, public libraries, and health sciences libraries)?
- You must start with defining the outcomes you want; thus you must start with your audience.
- A question to start the discussion of needs: Why don't you have MEDLINEplus linked on your home page?
- One goal might be that all, or some percentage of, public libraries have a link to MEDLINEplus.
- Public libraries need not just awareness but evaluation of the reference interview to determine satisfaction with the service (vs. providing the correct answer). Public librarians need to be trained in ways that can help them with different patrons—to recognize cultural attributes and barriers to learning. They need awareness of how to use the resources with their clientele.
- We need to be alert to needed improvements in the resources—some find that WebMD is easier to read. What are the differences between MEDLINEplus and WebMD?
- If the goal is that every person in the region has the right to access good health information, partnerships are the best approach. One program cannot provide access to all. We can reach out to public libraries to ensure they have the tools and knowledge needed to deliver health information in their communities. We can communicate with network members to encourage outreach partnerships with public libraries.
- Are network libraries aware of CBO's in their area that may be potential partners for health information outreach?
- Partnerships may be hard to count.
- Marketing is needed to put the word out about where to go for good health information. Who are we marketing to?
- Consumers need to know that search engines are not places to get information (search engines vs. information services).
- Do public libraries know what percentage of their population they reach? The Public Library Association strategic planning effort incorporates the questions: Who comes to the public library? Why?
- Some public libraries may not have the health information sought by the public.
- There are psychosocial issues in dealing with consumer health issues; people in small communities know each other.
- Countless health studies have demonstrated the importance of self efficacy (belief in one's capabilities to organize and execute courses of actions). Three conditions will cause people to seek health information: 1) they have some condition or disease, 2) someone they know is affected, or 3) they think they have been exposed or may be at risk.

- Public libraries want to feel they've authenticated the validity/quality of the resources they offer; this applies beyond print resources. Awareness of the NLM role in selecting and affirming the authority of resources linked in MEDLINEplus is important in reinforcing this service goal.
- Public librarians are interested in knowing what they can do without treading into the area of "giving medical advice." Comfort levels differ in providing health reference to the public (among health sciences as well as public librarians).
- In assessing the needs of the public library, two questions are key: Are you interested in the NLM resources? Do we have partners or affiliates in their area that they can work with?
- A potential outcome evaluation question might be that public librarians know that PubMed/MEDLINE is generally for professionals, and MEDLINEplus is for consumers; confusion persists about which resource is for which audience. Could these services be renamed?
- The bookmarks should note that MEDLINEplus contains "consumer" health information.

The discussion of PSRML outreach planning and evaluation will be continued via the RAC listserv and at future meetings.

The meeting was adjourned at 3:00 p.m., with thanks to all for their contributions. RAC members were invited to stay for informal demonstrations of NLM and NN/LM electronic resources.